PATENT APPLICATION FEE DETERMINATION RECORD Effective October1, 2003

Application or Docket Number

	CLAIMS AS FILED - PART I							SMALL	ENTITY		OTHE	R THAN.	
	TOTAL CLAIN	<u> (Colu</u>	(Column 1) (Co		olumn 2)		TYPE		OR	SMALI	ENTITY		
	FOR							RATE			RATE	FEE	
11-	······	SEABLE CLAIMS				BER EXTRA		BASIC F	EE \$335	OR	BASIC FE	E 3770	
11			minus 20= *				X\$ Q =		OR	X\$18 =			
11-	**************************************		minus 3 = "				X43=		OR	1	 		
MULTIPLE DEPENDENT CLAIM PRESENT								l	1			 	
•	If the differen	ce in column 1	is less than	ess than zero, enter "0" in column 2			•	+145=		OR			
				MENDED - PART II				TOTAL	·		•		
_	(Column 1) (Column 2) (Column 3)							SMALL ENTITY OR SMALL ENTITY					
AMENDMENTA		CLAIMS REMAINING		HIGHE NUMBI	ST ER	PRESENT	1 1		ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIOU PAID F		EXTRA	RATE		TIONA	L	RATE	TIONAL FEE	
	Total .	. 6	Minus	** .	H			X\$9=		OR	X\$ 8=	FEE	
AMI	Independent	1 /	Minus	***	3	=	H	XXIZ=		1			
<u></u>	Trinoi PHES	ENTATION OF N	AULTIPLE DE	PENDENT (MIAJ				 	OR	X26		
•	•	٠.	•	. ·	•		Į	+145:=		OR	1 990=		
		(Coliman 4)					A	TOTAL DDIT. FEE	<u></u>	JOR ,	TOTAL DDIT. FEE		
B		(Column 1) CLAIMS	19253976	(Column	1 2) ST	(Column 3)	-	· · · · ·					
Ę		REMAINING AFTER		. NUMBE PREVIOU:	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
DME	Total	* AMENDMENT	Minus	PAID FO	R		-		FEE			FEE	
AMENDMENT	Independent	*	Minus	**		=		X\$9=.		OR	X\$/8=		
₹	FIRST PRESE	NTATION OF M		PENDENT C	LAIM	-		X43=		OR	X86≠		
	•							+145=		OR	t290=		
			•				٠ ــــ	TOTAL		100 L	TOTAL	·	
-		(Column 1)		(Column	2) (Column 3)	AC	DDIT. FEE		lou V	DDIT: FEE		
<u>U</u> .		CLAIMS REMAINING		· HIGHES		PRESENT	Г		ADDI-	ır	<u>-</u>	ADDI	
NI.		AFTER AMENDMENT		PREVIOUS PAID FOR	LY	EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL	
	Total	*	Minus	**	<u>`</u>		-	· ·	FEE			FEE.	
7	Independent	*	Minus	***		=	-	X\$Q=		OR	X\$[8=	· · ·	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT CL	AIM			x13=		OR	X86		
• If	If the entry in column 1 is loss than the									OR	t390=		
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL OR TOTAL													
T	he *Highest Num	ber Previously Paid	For" (Total or	o space is les Independent) i	s than 3 s the hiç	l, enter "3." ghest number f	ound	in the app	opriate box	in colum)DIT. FEE L. nn 1.		